

Requirements for Meal Modifications in the Child and Adult Care Food Program (CACFP) Child Care Programs



Connecticut State Department of Education
Bureau of Health/Nutrition, Family Services and Adult Education
Child Nutrition Programs

Presentation Information

- This presentation provides general guidance regarding the meal modification requirements for child care programs that participate in the U.S. Department of Agriculture's (USDA) CACFP
- Links to relevant resources are indicated in the yellow bar at the bottom of a slide
- For detailed guidance, visit the Connecticut State Department of Education's (CSDE) Special Diets in CACFP Child Care Programs webpage at <https://portal.ct.gov/SDE/Nutrition/Special-Diets-in-CACFP-Child-Care-Programs/Documents>
- For specific questions or additional guidance, please contact the CSDE (see slide 104)

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USDA Meal Patterns for the CACFP

- CACFP sponsors must comply with the USDA's CACFP meal patterns
 - **Children** (ages 1-12, and through age 18 in at-risk afterschool care centers and emergency shelters)
 - **Infants** (birth through 11 months)
- However, modifications may be needed for children whose disability restricts their diet

Meal Patterns for Children: <https://portal.ct.gov/SDE/Nutrition/Meal-Patterns-CACFP-Child-Care-Programs>

Meal Patterns for Infants: <https://portal.ct.gov/SDE/Nutrition/Feeding-Infants-in-CACFP-Child-Care-Programs>

CACFP Child Care Programs Include

- Child care centers
- At-risk afterschool care centers
- Emergency shelters
- Family day care homes



<https://portal.ct.gov/SDE/Nutrition/Child-and-Adult-Care-Food-Program>

Meal Modifications

- Federal nondiscrimination laws *require* meal modifications for children whose disability (physical or mental impairment) restricts their diet
- All meal modifications must be made on a *case-by-case* basis to meet the specific medical condition and dietary needs of each individual child



Meal Modifications

- Meal modifications are *optional* for children without a disability



Federal Nondiscrimination Legislation



Federal Nondiscrimination Legislation

Contain provisions require CACFP facilities to make reasonable meal modifications for children whose disability restricts their diet

- Section 504 of the Rehabilitation Act of 1973
- Individuals with Disabilities Education Act (IDEA)
- Americans with Disabilities Act (ADA) of 1990 and the **ADA Amendments Act of 2008**
- USDA Nondiscrimination Regulations (7 CFR 15b)

Section 504 of the Rehabilitation Act of 1973

- Prohibits discrimination on the basis of disability in any federal government program that receives *federal financial assistance*



Individuals with Disabilities Education Act (IDEA)

- Federal grant program that provides financial assistance to states in the provision of *special education* and related services for eligible children
 - Section 619 of Part B defines the preschool program, which guarantees a free appropriate public education to children ages 3-5 with disabilities
- *Nutrition-related services* included in a child's individualized education program (IEP) that are necessary for the child to receive a free appropriate public education *must be provided* at no cost to the child's family

ADA Amendments Act

- *Expands and clarifies* definition of disability
 - Viewed more broadly
 - Encompasses more impairments that limit a major life activity and require an accommodation

- Clarifies that emphasis is on *providing reasonable modification*
 - Person with disability does *not* have high burden of proving their disability



Definition of Disability (ADA)

- A physical or mental impairment that *substantially limits* one or more *major life activities* of such individual
- A record of such an impairment
- Being regarded as having such an impairment



Definition of Disability (ADA)

ADA Amendments Act

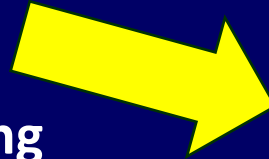
- Revises “substantially limits”
- Includes more “major life activities”



Expanded Definition of Disability

Major life activities

- Caring for one's self
- Performing manual tasks
- Seeing
- Hearing
- Eating
- Sleeping
- Walking
- Standing
- Lifting
- Bending
- Speaking
- Breathing
- Learning
- Reading
- Concentrating
- Thinking
- Communicating
- Working



New category

Major bodily functions

- Immune system
- Normal cell growth
- *Digestive*
- *Bowel*
- *Bladder*
- Neurological
- Brain
- Respiratory
- Circulatory
- Endocrine
- Reproductive

Includes Conditions that are not Life Threatening or Severe

- **A condition could be a disability even if it does not prevent or severely/significantly restrict a major life activity**
- **Individualized assessment (case-by-case basis)**

Example: A child whose digestion is impaired by a food intolerance may be a person with a disability, even if consuming the food does not cause the child severe distress

Disregards Mitigating Measures

- Determination of disability must be made without regard to ameliorative effects of *mitigating measures*
 - mitigating measures = medications, prosthetic devices, assistive devices, or learned behavioral or adaptive neurological modifications that an individual may use to eliminate or reduce the effects of an impairment

Disregards Mitigating Measures

Example: A child may be able to control an allergic reaction by taking medication

Example: A child may be able to control diabetes through insulin and diet

Includes Episodic Disabilities

- Modification is required if an impairment is *episodic or in remission* but substantially limits a major life activity when active
- Examples
 - mental illness
 - multiple sclerosis
 - Crohn's colitis
 - some forms of cancer

May include Temporary Disabilities

- Must consider *duration* (or expected duration) and *extent* to which impairment actually limits a major life activity

Examples

- A child had major oral surgery due to an accident and is unable to consume food for a significant period of time unless the texture is modified
- For several months, a child is on medication that requires avoidance of certain foods

May include Temporary Disabilities

- Modification is required if child's condition is temporary, but severe and lasts for a significant duration
- Must consider *duration* (or expected duration) and *extent* to which impairment actually limits a major life activity
 - Temporary illnesses or injury (cold, flu, minor broken bone) generally do not require reasonable meal modifications

Comparison of Federal Nondiscrimination Laws

| Criteria | IDEA | Section 504 | ADA Amendments Act |
|------------------------------------------------------------------------------------------------|------|-------------|--------------------|
| Child has a disability | Yes | Yes | Yes * |
| Child receives special education (public schools) | Yes | No | No |
| Meal accommodations required | Yes | Yes | Yes * |
| Federal funding available | Yes | No | No |
| * If child's medical condition meets the definition of disability under the ADA Amendments Act | | | |

Comparison of Federal Nondiscrimination Laws

| Criteria | IDEA | Section 504 | ADA Amendments Act |
|----------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|
| Plan on file | <ul style="list-style-type: none"> Individualized Education Program (IEP) Individualized Health Care Plan (IHCP) May also have Emergency Care Plan (ECP) | <ul style="list-style-type: none"> Section 504 Plan IHCP May also have ECP | <ul style="list-style-type: none"> IHCP May also have ECP |
| Required documentation for meal modification | Medical statement signed by recognized medical authority * | Medical statement signed by recognized medical authority * | Medical statement signed by recognized medical authority |

* Medical statement is not required if the child's IEP or Section 504 plan includes the same information required in the medical statement (see slide 42)

CSDE Resource

Summary of Requirements for Accommodating Special Diets in the CACFP

Summary of Requirements for Accommodating Special Diets for Children in the Child and Adult Care Food Program (CACFP)

This document summarizes the requirements for meal modifications for children in the U.S. Department of Agriculture's (USDA) CACFP. These requirements apply to all CACFP child care facilities, including child care centers, at-risk afterschool care centers, emergency shelters, and family day care homes. The USDA's nondiscrimination regulations (7 CFR 15b) and CACFP regulations (7 CFR 226.20(g)) require reasonable modifications for children whose disability restricts their diet, based on a written medical statement signed by a recognized medical authority.

Under the Americans with Disabilities (ADA) Amendments Act of 2008, most physical and mental impairments will constitute a disability. This includes conditions that impair immune, digestive, neurological, and bowel functions, as well as many others. A physical or mental impairment does not need to be life threatening to constitute a disability. Limiting a major life activity is sufficient. For example, a child whose digestion is impaired by a food intolerance (such as lactose intolerance) may be a person with a disability, regardless of whether consuming the food causes the child severe distress. All disability considerations must be reviewed on a case-by-case basis, i.e., specific to the individual medical condition and dietary needs of each child.

CACFP facilities may choose to make optional modifications (within the CACFP meal patterns) for children whose dietary restrictions do not constitute a disability. Examples of optional modifications include requests related to religious or moral convictions, general health concerns, and personal food preferences, such as a family's preference that their child eats a gluten-free diet or organic foods because they believe it is healthier. For information on the requirements for meal modifications, review the Connecticut State Department of Education's (CSDE) guide, *Accommodating Special Diets in CACFP Child Care Programs*, and visit the CSDE's [Special Diets in CACFP Child Care Programs](#) webpage.

| Scenario | Determination of disability | Plan on file | Examples of medical conditions ¹ | Modification required? | Required documentation | What medical statement must include |
|-------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|-------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Child is determined to have a disability (physical or mental impairment) under Section 504, and the disability restricts the child's diet | Section 504 meeting | <ul style="list-style-type: none">• 504 plan and Individualized Health Care Plan (IHCP)• May also have an Emergency Care Plan (ECP) depending on child's medical condition | Medical conditions that substantially limit a major life activity and affect the child's diet, for example: <ul style="list-style-type: none">• metabolic diseases, such as diabetes or phenylketonuria (PKU)• food anaphylaxis (life-threatening food allergy) | Yes | Medical statement signed by recognized medical authority ^{2,3} | <ul style="list-style-type: none">• Information about how the child's physical or mental impairment restricts the child's diet• An explanation of what must be done to accommodate the child• The food or foods to be omitted and recommended alternatives, if appropriate |

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Disability Discrimination Related to CACFP Meals



Prohibited by 7 CFR 15b.4(b)(1)

- Denying a person with a disability the *opportunity to participate in or benefit from* the recipient's aid, benefit, or services
- Providing a person with a disability an opportunity to participate that is *not equal* to the opportunity provided to others
- Providing a person with a disability an aid, benefit, or service that is *not as effective* as the aid, benefit, or service provided to others
- Providing a person with a disability a *different* aid, benefit, or service, unless doing so is necessary to provide an aid, benefit, or service that is *as effective* as those provided to others

Types of Disability Discrimination *(violation of civil rights laws)*

- Discrimination because of the disability
 - Denying benefits or opportunity to participate
 - Segregating individuals with disabilities
 - Aiding, perpetuating, or contracting with others that discriminate
- Failure to provide a reasonable modification
- Ineffective communication
- Inaccessible facilities



CACFP facilities must ensure discrimination does not occur

What Constitutes a Disability



What Constitutes a Disability

- Based on *federal nondiscrimination laws* and a recognized medical authority's *diagnosis* of child's medical condition
- *Medical statement* (or Section 504 plan or IEP, if applicable) indicates if child has a physical or mental impairment (disability) that restricts their diet



USDA Nondiscrimination Regulations (7 CFR 15b)

- Prohibit discrimination against children with disabilities in any USDA program or activity



Is Meal Modification Required?

- Can determine if a child requires a meal modification by reviewing *question 10* in section B of the CSDE's form, *Medical Statement for Meal Modifications in CACFP Child Care Programs*

Section B – Completed by child's recognized medical authority

This section must be completed by the child's physician, physician assistant, doctor of osteopathy, or advanced practice registered nurse (APRN). APRNs include nurse practitioners, clinical nurse specialists, and certified nurse anesthetists who are licensed as APRNs.

10. **Physical or mental impairment:** Does the child have a physical or mental impairment that restricts the child's diet?
- ☐ No ☐ Yes: Describe how the child's physical or mental impairment restricts the child's diet.

Is Meal Modification Required?

Section B – Completed by child's recognized medical authority

This section must be completed by the child's physician, physician assistant, doctor of osteopathy, or advanced practice registered nurse (APRN). APRNs include nurse practitioners, clinical nurse specialists, and certified nurse anesthetists who are licensed as APRNs.

10. **Physical or mental impairment:** Does the child have a physical or mental impairment that restricts the child's diet?

☐ No

☒ **Yes:** Describe how the child's physical or mental impairment restricts the child's diet.



- If “Yes,” CACFP facility **must** make meal modification
- If “No,” CACFP facility can **choose**, but is not required, to make meal modification

Examples of Disabilities that May Require Meal Modifications *

- Autism
- Cancer
- Celiac disease
- Cerebral palsy
- Diabetes
- Food allergies (including non-life-threatening)
- Food intolerances, e.g., lactose, gluten
- Heart disease
- Metabolic disorders
- Obesity
- Phenylketonuria (PKU)
- Seizure disorder
- Certain temporary disabilities

* This list is *not all-inclusive* and these conditions *might not require meal modifications for all children* (case-by-case basis)

Disabilities Do Not Include

- General health concerns
- Personal preferences
- Vegetarianism
- Religious or moral convictions



Examples

- Parents prefer a gluten-free or organic diet for their child because they believe it is healthier
- A child does not eat certain foods for religious reasons

Resources for What Constitutes a Disability

- **CSDE Guide: *Accommodating Special Diets in CACFP Child Care Programs* (see slide 97)**
- **CSDE Handout: *Guidance and Instructions: Medical Statement for Meal Modifications in CACFP Child Care Programs* (see slide 45)**
- **CSDE Operational Memorandum No. 2C-18 and 2H-18 (see slide 98)**
- **USDA Policy Memo CACFP 14-2017 (see slide 99)**

Meal Modifications for Children with Disabilities



USDA Requirements for Meal Modifications

General Guideline

Children with disabilities must be able to participate in and receive benefits from programs that are available to children without disabilities



USDA Requirements for Meal Modifications

- USDA requires *reasonable* modifications if a disability restricts the child's diet
- Must be *documented* with a medical statement signed by a recognized medical authority



Definition of Reasonable Modification

A change or alteration in policies, practices, and/or procedures to accommodate a disability that ensures children with disabilities have equal opportunity to participate in or benefit from a program



Definition of Recognized Medical Authority

A state-licensed health care professional who is *authorized to write medical prescriptions under state law* and is recognized by the Connecticut State Department of Public Health

- physicians (MD)
- physician assistants (PA or PAC)
- doctors of osteopathy (DO)
- advanced practice registered nurses (APRN)



CACFP facilities cannot accept medical statements signed by any other individuals

USDA Requirements for Medical Statement



Medical Statement Must Include

- *Information* about child's physical or mental impairment (disability) that is sufficient to allow the CACFP facility to understand how the impairment restricts the child's diet
- An *explanation* of what must be done to accommodate the child's disability
- If appropriate, the *food or foods to be omitted and recommended alternatives*

Appropriate Medical Statement

- **Recommendation: Use the CSDE's form (see slide 44)**
- **If CACFP facility uses an alternate form, it must contain the information required by USDA (see slide 42)**
- **To protect children's privacy and confidentiality, the CACFP facility's medical statement cannot require a specific diagnosis by name or use the term "disabled" or "disability"**

CSDE Resource

Medical Statement for Meal Modifications in CACFP Child Care Programs

- English
- Spanish

Medical Statement for Meal Modifications in Child and Adult Care Food Program (CACFP) Child Care Programs

This form applies to requests for meal modifications for children participating in the U.S. Department of Agriculture's (USDA) CACFP child care facilities, which include child care centers, at-risk afterschool care centers, emergency shelters, and family day care homes. CACFP facilities are required to make reasonable meal modifications for children whose physical or mental impairment restricts their diet. For guidance on meal modifications and instructions for completing this form, see the Connecticut State Department of Education's (CSDE) document, *Guidance and Instructions: Medical Statement for Meal Modifications in CACFP Child Care Programs*.

Note: The USDA requires that the medical statement include: 1) information about the child's physical or mental impairment that is sufficient to allow the CACFP facility to understand how the impairment restricts the child's diet; 2) an explanation of what must be done to accommodate the child's disability; and 3) if appropriate, the food or foods to be omitted and recommended alternatives. **CACFP facilities should not deny or delay a requested meal modification because the medical statement does not provide sufficient information.** When necessary, CACFP facilities should work with the child's parent or guardian to obtain the required information. While obtaining additional information, the CACFP facility should follow the portion of the medical statement that is clear and unambiguous to the greatest extent possible.

Section A – Completed by parent or guardian

1. Name of child: _____ 2. Birth date: _____

3. Name of parent or guardian: _____

4. Phone number (with area code): _____ 5. E-mail address: _____

6. Address: _____ City: _____ State: _____ Zip: _____

7. In accordance with the provisions of the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and the Family Educational Rights and Privacy Act (FERPA), I hereby authorize _____
name of child's recognized medical authority
to release such protected health information of my child as is necessary for the specific purpose of special diet information to _____ and I consent to allow the recognized medical authority to freely
name of CACFP child care center or family day care home
exchange the information listed on this form and in my child's records with the child care program as necessary. I understand that I may refuse to sign this authorization without impact on the eligibility of my request for a special diet for my child. I understand that I may rescind permission to release this information at any time, except when the information has already been released.

8. Signature of parent or guardian: _____ 9. Date: _____

Section B – Completed by child's recognized medical authority

This section must be completed by the child's physician, physician assistant, doctor of osteopathy, or advanced practice registered nurse (APRN). APRNs include nurse practitioners, clinical nurse specialists, and certified nurse anesthetists who are licensed as APRNs.

10. **Physical or mental impairment:** Does the child have a physical or mental impairment that restricts the child's diet?
☐ No ☐ Yes: Describe how the child's physical or mental impairment restricts the child's diet.

11. **Diet plan:** Explain the meal modification for the child. Attach a specific diet plan, if needed.

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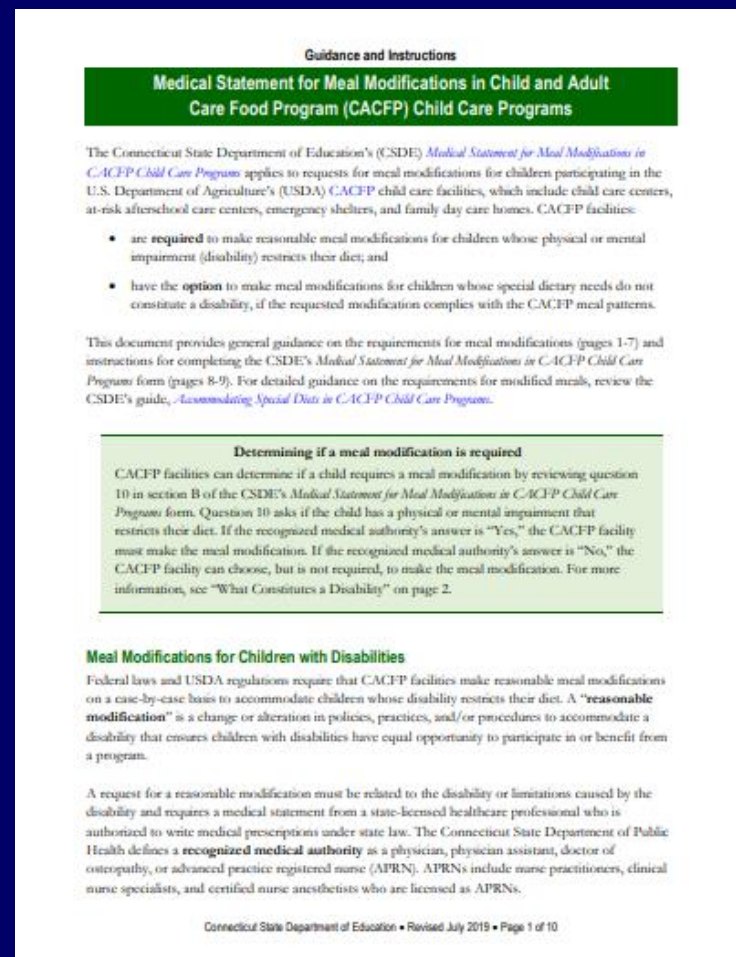
<https://portal.ct.gov/-/media/SDE/Nutrition/CACFP/SpecDiet/MedicalCACFPinstr.pdf>

https://portal.ct.gov/-/media/SDE/Nutrition/CACFP/SpecDiet/MedicalCACFP_Spanish.pdf

CSDE Resource

Guidance and Instructions: Medical Statement for Meal Modifications in CACFP Child Care Programs

- English
- Spanish



<https://portal.ct.gov/-/media/SDE/Nutrition/CACFP/SpecDiet/MedicalCACFPinstr.pdf>

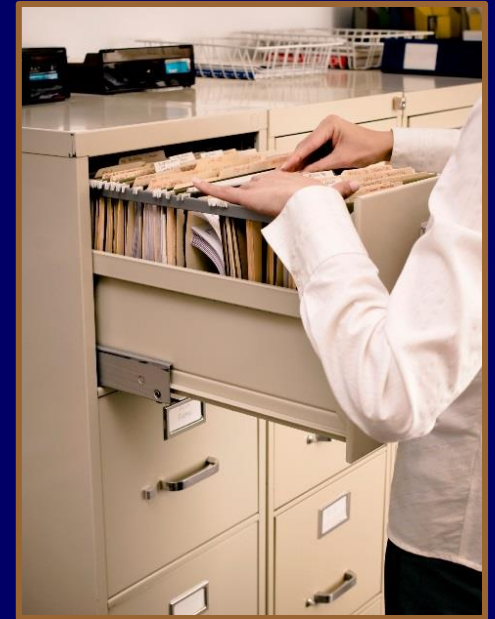
https://portal.ct.gov/-/media/SDE/Nutrition/CACFP/SpecDiet/MedicalCACFPinstr_Spanish.pdf

Handling Missing Information

- CACFP facilities *cannot deny or delay* a requested meal modification with insufficient information
 - Must obtain appropriate clarification
 - Must work with parent/guardian to obtain amended medical statement
- While obtaining additional information, CACFP facilities must follow the *portion of the medical statement that is clear and unambiguous* to greatest extent possible

Updates to Medical Statements

- Changes to diet orders must be in *writing* on a medical statement signed by a recognized medical authority
- CACFP facilities should *develop a plan* for ensuring that dietary information on file is current
- USDA recommends that CACFP facilities maintain documentation when *ending* a meal accommodation



Good Communication is Important

- USDA encourages *inclusive team approach* to provide appropriate meal modifications
 - individuals from sponsoring organization, center, or family day care home
 - other individuals with appropriate training, e.g., nurse and registered dietitian
 - food service personnel
 - disability coordinator, e.g., Section 504 Coordinator (if available)



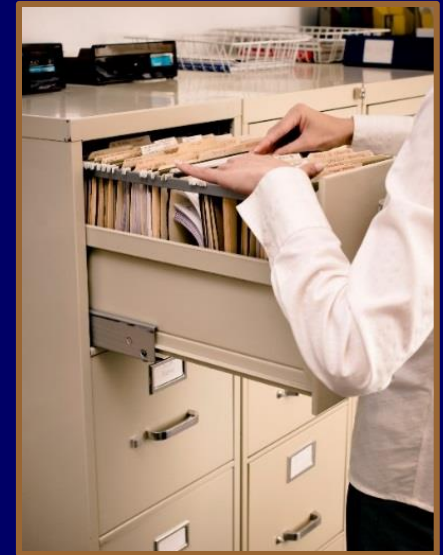
Good Communication is Important

- *Establish procedures* for identifying children with special dietary needs and providing applicable information to food service staff and other applicable child care staff who plan, prepare, and serve CACFP meals and snacks



Sharing of Medical Statements

- **The Health Insurance Portability and Accountability Act of 1996 (HIPAA) permits disclosure of personal health information needed for patient care and other important purposes**
 - **May share copies of children's medical statements with food service and other applicable child care staff for the purposes of meal modifications**



CACFP Obligations for Reasonable Meal Modifications



CACFP Obligations for Reasonable Meal Modifications

General Guideline

CACFP facility must offer a *medically appropriate* and *reasonable* modification that effectively *accommodates* the child's disability and provides *equal opportunity* to participate in or benefit from the CACFP



CACFP Obligations for Reasonable Meal Modifications

- Modification must be *related to disability* based on child's medical statement
- Must assess each request on a *case-by-case basis* to determine appropriate modification
- Can consider *cost, efficiency, and age* of child



General Guideline: CACFP facility must offer a medically appropriate and reasonable modification that effectively accommodates the child's disability and provides equal opportunity to participate in or benefit from the CACFP

Food Substitutions

- Not required to provide the *same* meal
- Not required to provide a *specific number* of alternate meals
- Generally not required to provide a *specific brand of food*, unless medically necessary

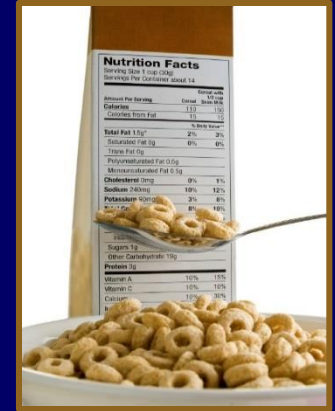


General Guideline: CACFP facility must offer a medically appropriate and reasonable modification that effectively accommodates the child's disability and provides equal opportunity to participate in or benefit from the CACFP



Nutrition Information

- CACFP facility must make *nutrition information for CACFP meals and snacks available* to families, health consultants, and others, as needed



- **Best Practice:** Develop *cycle menus* for common special diets, e.g., five-day gluten-free diet cycle menu or two-week cycle menu for a specific food allergy
 - ▶ Check with parents/guardians to ensure cycle menu meet their child's specific dietary requirements

Texture Modifications

- Meals modified for texture (chopped, ground or pureed) consist only of *regular menu items*, unless otherwise specified
- Medical statement not required
 - However, CSDE recommends medical statement to ensure clear communication between parents/guardians and CACFP staff about appropriate meal modifications



Meal Services Outside USDA Programs

- CACFP facilities are not required to provide meal services to children with disabilities when the meal service is *not normally available for all children*

Example: A CACFP facility that does not serve breakfast is not required to provide breakfast for children with disabilities



Identifying Children



Identifying Children

- Policies and practices must
 - *protect the privacy* of children who have a disability
 - *maintain the confidentiality* of each child's medical condition
- *Cannot outwardly identify children* whose disability requires a meal modification

Identifying Children

Unacceptable practices

- Posting lists of children's dietary needs in public areas, e.g., a list of children with food allergies
- Asking children or parents/guardians to consent to a physical designation, such as wearing a lanyard, bracelet, pin, sticker, or similar item

Identifying Children

Acceptable practices

- **Conduct a daily pre-service meeting with all applicable staff to review the CACFP menu and identify any menu items that should be avoided for certain dietary restrictions, such as food allergies, lactose intolerance, and gluten intolerance**

Identifying Children

Acceptable practices

- Provide regular staff updates for each child whose disability requires a meal modification
- Post information about children's meal modifications in locations that are *only visible to applicable staff*, such as food service staff and the child care staff supervising CACFP meals and snacks



Identifying Children

Acceptable practices

- **Maintain ongoing communication with parents/guardians to explain the CACFP facility's procedures for meal modifications, CACFP menus, and ensuring allergen-free meals and snacks**
- **Use a variety of communication methods, such as the CACFP facility's website, handbooks, newsletters, e-mails, handouts, menu backs, bulletin boards and displays, meetings, and child care program events**

Identifying Children

Acceptable practices

- Different colored plates or trays to identify meals that meet specific dietary criteria
- If appropriate to the CACFP facility's logistics and children's developmental stages, use colored tags or labels, placards, or similar signage near each food item to identify each food item's dietary criteria

Appropriate Eating Areas



Appropriate Eating Areas

- Must accommodate children with disabilities in *least restrictive* and *most integrated* setting
 - Children with disabilities must participate with children without disabilities to the maximum extent appropriate
- Ensure food service areas are *accessible*
- Provide *auxiliary aids and services*, if needed
 - food service aides
 - adaptive feeding equipment
 - meal tracking assistance
 - other effective methods

Appropriate Eating Areas

- Separate table for children with certain special needs may be appropriate under some circumstances
 - Must always be based on what is appropriate to *meet children's needs*
 - Cannot segregate as a matter of convenience or for disciplinary reasons



Example: Appropriate Eating Areas



A child requires a large degree of assistance from an aide in order to consume her meals. During the meal service, is it appropriate for the child and the aide to be at a separate table that has more space?

Yes

If this is in the best interest of meeting the child's needs

Example: Appropriate Eating Areas



A child care center designates a separate table where children with severe food allergies can safely consume their meals. Is this an appropriate practice?

Yes

- If this is in the best interest of meeting each child's needs
- Must be cleaned according to food safety guidelines to eliminate possible cross-contact of allergens on tables and seating

Example: Appropriate Eating Areas



A child care center designates an area away from the dining area where children with severe food allergies can safely consume their meals. Is this an appropriate practice?

Yes

- If this is in the best interest of meeting each child's needs
- Must be cleaned according to food safety guidelines to eliminate possible cross-contact of allergens on tables and seating

Separate Eating Areas for Food Allergies

- CACFP facilities should determine if a special seating arrangement is *truly necessary*
 - Get input from child's parent/guardian and recognized medical authority
- *Allow other children to join* children with food allergies, provided they do not bring any foods that are potentially dangerous to those children

Food Bans

- Universal exclusion of specific foods (or food groups) is *not USDA policy*
 - Could be appropriate depending on local circumstances
- If a CACFP facility enacts a universal ban, the specific allergen must *never be present in the child care setting*
 - Parents/guardians will assume the CACFP facility is a safe place for their child based on the stated ban



Procured Meals



Procured Meals

- Federal regulations specifically prohibit disability discrimination through contracts
- Must make reasonable modifications for children with disabilities, regardless of whether the CACFP facility
 - operates the food service
 - contracts with a food service management company (FSMC)
 - purchases vended meals



Procured Meals

- As applicable, CACFP facilities *must address modifications for children with disabilities* in any contracts with a vendor or FSMC
- CACFP facilities must make certain the vendor or FSMC is aware that meal modifications may be required during the term of the contract

Procured Meals

- Review USDA Memo SP 40-2016, CACFP 12-2016 and SFSP 14-2016, *Updated Guidance: Contracting with Food Service Management Companies*



<https://www.fns.usda.gov/updated-guidance-contracting-food-service-management>

Procedural Safeguards



Procedural Safeguards

See page 7 of CSDE Operational Memorandum No. 2C-18 and 2H-18

- USDA encourages CACFP facilities to implement procedures for parents/guardians to
 - request a reasonable meal modification
 - resolve grievances
- At a minimum, must *provide notice of nondiscrimination and accessible services*, as outlined in USDA's nondiscrimination regulations (7 CFR 15b.7)

Procedural Safeguards

See page 7 of CSDE Operational Memorandum No. 2C-18 and 2H-18

- CACFP sponsors should ensure that center staff and family day care home providers understand the procedures for handling requests for meal modifications



Procedural Safeguards for CACFP facilities with 15 or more employees

- Must designate at least one person to *coordinate compliance with disability requirements* (often referred to as the Section 504 Coordinator)
- Must establish *grievance procedures* that incorporate appropriate due process standards and that provide for the prompt and equitable resolution of complaints

USDA's Nondiscrimination Regulations (7 CFR 15b.6): <https://www.govinfo.gov/content/pkg/CFR-2010-title7-vol1/pdf/CFR-2010-title7-vol1-part15b.pdf>

USDA recommends that grievance procedures include

- allowing participants or their representatives to *submit a grievance* (complaint with any supporting documentation) for consideration by the CACFP facility
- providing that a *prompt decision* by the CACFP facility be rendered to the participant or participant's representative regarding the grievance

USDA recommends that grievance procedures include

- ensuring that the decision includes the *official USDA nondiscrimination statement*, which advises the participant how to file a complaint with the USDA's Food and Nutrition Service (FNS)
 - The CSDE's document, *CACFP Civil Rights Requirements*, contains the official USDA nondiscrimination statement

<https://portal.ct.gov/-/media/SDE/Nutrition/CivilRights/CACFPCivilRights.pdf>

Procedural Safeguards for CACFP facilities with less than 15 employees

- **USDA recommends having someone on staff who can provide technical assistance to centers and family day care homes when they are making meal modifications for children with disabilities**

Meal Modifications for Children without Disabilities



Meal Modifications for Children without Disabilities

- **Optional**
- **Must always comply with the CACFP meal patterns**
- **Medical statement not required**
 - **CSDE recommends medical statement to ensure clear communication between parents/guardians and staff about appropriate meal modifications**



Meal Pattern Requirements for Milk

- CACFP meal patterns *require* milk at breakfast, lunch, and supper and *allow* milk as one of the two snack components

| Age group | Allowable types of milk |
|------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------|
| 1 | Unflavored whole |
| 2-5 | Unflavored low-fat (1%) Unflavored fat-free |
| 6-18 | Unflavored low-fat (1%) Unflavored fat-free * |
| * Flavored fat-free milk can be served to ages 6 and older, but the USDA's <i>CACFP Best Practices</i> recommends serving only unflavored milk | |

Two Allowable Types of Milk Substitutes for Children without Disabilities

- CACFP facilities may choose to offer one or more *allowable milk substitutes* in place of milk, including

- lactose-reduced or lactose-free milk that meets the fat and flavor restrictions
- a nondairy beverage that meets the USDA nutrition standards for fluid milk substitutes



Milk Substitutes for Children without Disabilities

- *Without a disability,*
cannot offer juice,
water, or any other
beverages as a
substitute for milk,
even if specified on a
medical statement



Summary of Allowable Milk Substitutes for Children with and without a Disability

| Beverage | Allowable substitute? | |
|-------------------------------------------------------------------------------------------------------------------------|-----------------------|---------------|
| | Disability | No disability |
| Juice | Yes * | No |
| Water | Yes * | No |
| Nondairy milk substitute that complies with the USDA's nutrition standards for fluid milk substitutes, such as soy milk | Yes * | Yes |
| * If specified by the recognized medical authority in the child's medical statement | | |

Summary of Allowable Milk Substitutes for Children with and without a Disability

| Beverage | Allowable substitute? | |
|----------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|---------------|
| | Disability | No disability |
| Nondairy milk substitute that does not meet USDA's nutrition standards for fluid milk substitutes, such as almond milk, rice milk, and cashew milk | Yes * | No |
| * If specified by the recognized medical authority in the child's medical statement | | |

Summary of Allowable Milk Substitutes for Children with and without a Disability

| Beverage | Allowable substitute? | |
|-------------------------------------------------------------------------------------|-----------------------|---------------|
| | Disability | No disability |
| Nutrition supplement beverages, such as Abbott's Pediasure | Yes * | No |
| Powdered milk beverages such as Nestle's NIDO | Yes * | No |
| * If specified by the recognized medical authority in the child's medical statement | | |

CSDE Resource

Allowable Milk Substitutes for Children without Disabilities in the CACFP

Allowable Milk Substitutes for Children without Disabilities in the Child and Adult Care Food Program

The requirements in this document apply only to milk substitutes for children whose dietary needs do not constitute a disability. Meal modifications for children whose disability restricts their diet must follow the federal nondiscrimination laws and regulations. For more information, review the Connecticut State Department of Education's (CSDE) guide, *Accommodating Special Diets in CACFP Child Care Programs*.



Child care facilities (including child care centers, Head Start centers, at-risk afterschool care centers, emergency shelters, and family day care homes) that participate in the Child and Adult Care Food Program (CACFP) must follow the U.S. Department of Agriculture's (USDA) requirements for milk substitutes for children without disabilities. These requirements apply only to meal modifications for children without disabilities who cannot drink milk.

CACFP facilities have the option to offer one or more allowable fluid milk substitutes for children without disabilities. If the CACFP facility chooses to make allowable milk substitutes available, they must be available for all children when requested by a parent or guardian. The USDA does not provide additional reimbursement for these substitutions.

Allowable Fluid Milk Substitutes

CACFP facilities may choose to offer one or more allowable milk substitutes for children whose dietary needs do not constitute a disability. The two types of allowable substitutes include:

- lactose-free or lactose-reduced milk that meets the appropriate fat content for each age group (i.e., unflavored whole milk for age 1; unflavored low-fat (1%) milk or unflavored fat-free milk for ages 2-5; and unflavored low-fat (1%) milk or unflavored or flavored fat-free milk for ages 6-12, and ages 13-18 in at-risk afterschool programs and emergency shelters); and
- nondairy milk substitutes that meet the USDA's nutrition standards for fluid milk substitutes (see table 1), such as certain brands of soy milk.

The USDA recommends that lactose-free or lactose-reduced milk is the first choice for children with lactose intolerance.

CACFP facilities may choose to offer only one milk substitute, such as lactose-free low-fat unflavored milk. If children decide not to take this option, the CACFP facility is not obligated to offer any other milk substitutes. CACFP



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Summary of USDA Requirements



Summary of USDA Requirements for Meal Modifications

| Criteria | Disability | No disability |
|----------------------------------------------------------|------------------------------------------------------------------------------|---------------|
| Meal modification | Required * | Optional |
| Medical statement signed by recognized medical authority | Required (unless the same information is in child's IEP or Section 504 Plan) | Recommended |
| Modified meals must meet CACFP meal patterns | No | Yes |

* If disability restricts participant's diet

Determining if Meal Modifications Are Required

Does the child have a physical or mental impairment that meets the definition of **disability** under any of the federal nondiscrimination laws (Section 504, the ADA and ADA Amendments Act, and the USDA's nondiscrimination regulations 7 CFR 15 b)?

YES

Does the physical or mental impairment **restrict the child's diet**?

YES

Did the child's parent/guardian provide a **medical statement** signed by a recognized medical authority that indicates:

- how the child's physical or mental impairment restricts the child's diet;
- an explanation of what must be done to accommodate the child; and
- if appropriate, the food or foods to be omitted and recommended alternatives?

YES

CACFP facility is **required** to make a reasonable meal modification

NO

CACFP facility is **not required** to make the meal modification

NO

CACFP facility is **required** to make a reasonable meal modification and must work with child's parent/guardian to obtain a medical statement

CACFP facility is **not required** to make the meal modification

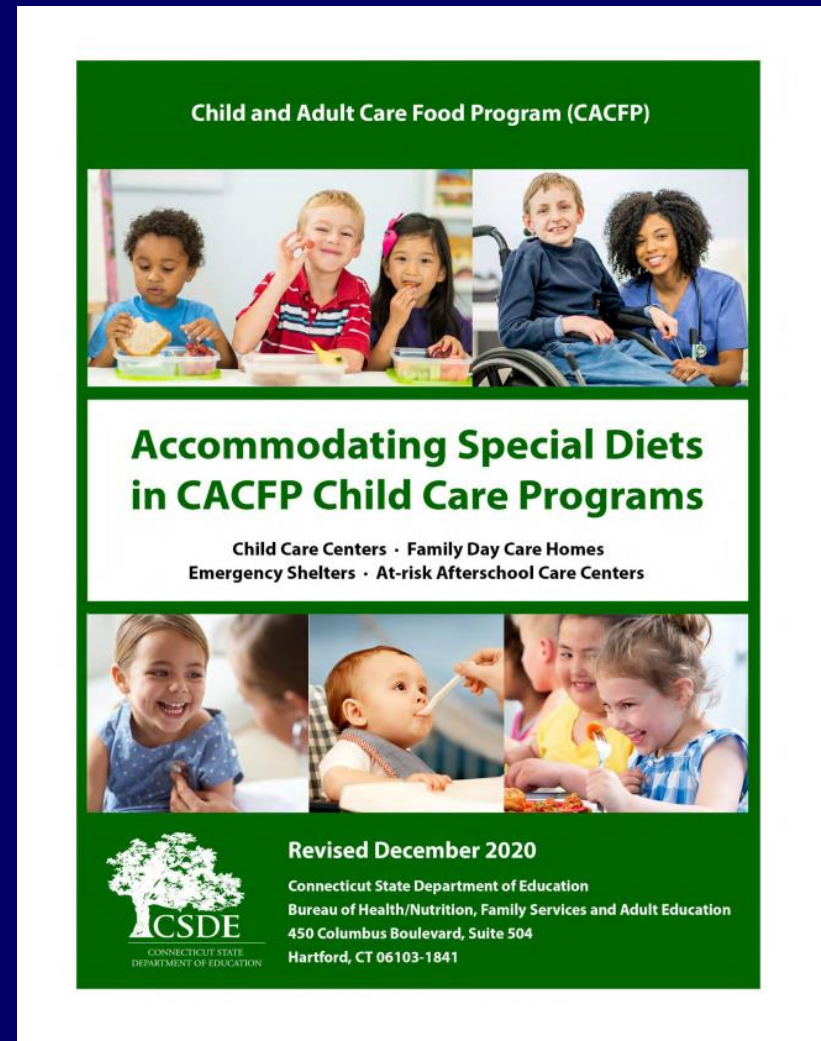
More Resources



CSDE Resource

Accommodating Special Diets in CACFP Child Care Programs

- Detailed information and guidance on the federal and state requirements for meal modifications in the CACFP





<https://portal.ct.gov/-/media/SDE/Nutrition/CACFP/SpecDiet/GuideSpecialDietsCACFP.pdf>

CSDE Operational Memorandum

Operational Memorandum No. 2C-18 and 2H-18

(October 20, 2017)

Requirements for Meal Modifications in CACFP Child Care Centers and Family Day Care Homes



STATE OF CONNECTICUT
DEPARTMENT OF EDUCATION

TO: Child and Adult Care Food Program (CACFP) Child Care Centers and Family Day Care Home Sponsors

FROM: John D. Frassinelli, Chief
Bureau of Health/Nutrition, Family Services and Adult Education

DATE: October 20, 2017

SUBJECT: Operational Memorandum No. 2C-18 and 2H-18
Requirements for Meal Modifications in CACFP Child Care Centers and Family Day Care Homes

On June 22, 2017, the U.S. Department of Agriculture (USDA) issued policy memo [CACFP 14-2017 SFSP 10-2017: Modifications to Accommodate Disabilities in CACFP and SFSP](#). This operational memorandum **significantly changes** the requirements and process for meal modifications for children with disabilities in CACFP child care centers (including Head Start centers, at-risk afterschool care centers, and emergency shelters) and family day care homes.

This operational memorandum provides an overview of the key requirements for meal modifications, including relevant legislation and definitions, and summarizes the Connecticut State Department of Education's (CSDE) special diets implementation resources for CACFP child care centers and family day care homes. For detailed guidance, review the CSDE's guide, [Accommodating Special Diets in CACFP Child Care Programs](#).

REVISED RESOURCES

The CSDE has recently revised the following documents to reflect the USDA's policy guidance in CACFP 14-2017 SFSP 10-2017:

- [Accommodating Special Diets in CACFP Child Care Programs](#);
- [Allowable Milk Substitutes for Children without Disabilities in the CACFP](#);
- [Medical Statement for Meal Modifications in CACFP Child Care Programs](#);
- [Guidance and Instructions: Medical Statement for Meal Modifications in CACFP Child Care Programs](#) (new resource); and
- [Summary of Requirements for Accommodating Special Diets in the CACFP](#) (new resource).

Please discard any old versions of these documents and replace with the revised versions. CACFP sponsors must carefully review these resources to ensure compliance with the USDA requirements for meal modifications for children with disabilities in the CACFP.

Please note that there is only one medical statement for all meal modification requests for children with and without disabilities. This form replaces the previous two forms (medical statement for children with disabilities and medical statement for children without disabilities).

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https://portal.ct.gov/-/media/SDE/Nutrition/CACFP/Memos/OM2018/OM02C18_02H18.pdf

USDA Policy Memo

CACFP 14-2017 SFSP 10-2017 (June 22, 2017) *Modifications to Accommodate Disabilities in CACFP and SFSP*



Food and
Nutrition
Service

Park Office
Center

3101 Park
Center Drive
Alexandria
VA 22302

DATE: June 22, 2017

MEMO CODE: CACFP 14-2017, SFSP 10-2017

SUBJECT: Modifications to Accommodate Disabilities in the Child and Adult Care Food Program and Summer Food Service Program

TO: Regional Directors
Special Nutrition Programs
All Regions

State Directors
Child Nutrition Programs
All States

This memorandum outlines the requirements for Child and Adult Care Food Program (CACFP) institutions and facilities and Summer Food Service Program (SFSP) sponsors (Program operators) to provide reasonable modifications to Program meals or the meal service to accommodate children or adults (participants) with disabilities. This memorandum supersedes FNS Instruction 783-2, Rev. 2. With the release of this memorandum, FNS Instruction 783-2, Rev. 2 has been rescinded.

BACKGROUND

This guidance only addresses modifications required to accommodate disabilities that restrict a participant's diet. Program operators have the option to accommodate special dietary needs that do not constitute a disability, including those related to religious or moral convictions or personal preference. Additional guidance on accommodating special dietary needs and preferences that are not related to a disability will be provided separately.

Program regulations require Program operators to ensure that breakfast, lunch, snack, or milk (meals) offered through the CACFP and SFSP meet the respective meal pattern requirements established in the Program regulations. Federal law and USDA regulations further require Program operators to make reasonable modifications to accommodate participants with disabilities. This includes providing special meals, at no extra charge, to participants with a disability that restricts the participant's diet.

Program operators are required to make substitutions to meals for participants with a disability that restricts participant's diet on a case-by-case basis and only when supported by a written statement from a State licensed healthcare professional,

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<https://www.fns.usda.gov/modifications-accommodate-disabilities-cacfp-and-sfsp>

CSDE Resource

Self-assessment of Child Care Practices for Special Diets in the CACFP

Summary of Requirements for Accommodating Special Diets for Children in the Child and Adult Care Food Program (CACFP)

This document summarizes the requirements for meal modifications for children in the U.S. Department of Agriculture's (USDA) CACFP. These requirements apply to all CACFP child care facilities, including child care centers, at-risk afterschool care centers, emergency shelters, and family day care homes. The USDA's nondiscrimination regulations (7 CFR 15b) and CACFP regulations (7 CFR 226.20(g)) require reasonable modifications for children whose disability restricts their diet, based on a written medical statement signed by a recognized medical authority.

Under the Americans with Disabilities (ADA) Amendments Act of 2008, most physical and mental impairments will constitute a disability. This includes conditions that impair immune, digestive, neurological, and bowel functions, as well as many others. A physical or mental impairment does not need to be life threatening to constitute a disability. Limiting a major life activity is sufficient. For example, a child whose digestion is impaired by a food intolerance (such as lactose intolerance) may be a person with a disability, regardless of whether consuming the food causes the child severe distress. All disability considerations must be reviewed on a case-by-case basis, i.e., specific to the individual medical condition and dietary needs of each child.

CACFP facilities may choose to make optional modifications (within the CACFP meal patterns) for children whose dietary restrictions do not constitute a disability. Examples of optional modifications include requests related to religious or moral convictions, general health concerns, and personal food preferences, such as a family's preference that their child eats a gluten-free diet or organic foods because they believe it is healthier. For information on the requirements for meal modifications, review the Connecticut State Department of Education's (CSDE) guide, *Accommodating Special Diets in CACFP Child Care Programs*, and visit the CSDE's *Special Diets in CACFP Child Care Programs* webpage.

| Scenario | Determination of disability | Plan on file | Examples of medical conditions ¹ | Modification required? | Required documentation | What medical statement must include |
|-------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|-------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Child is determined to have a disability (physical or mental impairment) under Section 504, and the disability restricts the child's diet | Section 504 meeting | <ul style="list-style-type: none">• 504 plan and Individualized Health Care Plan (IHCP)• May also have an Emergency Care Plan (ECP) depending on child's medical condition | Medical conditions that substantially limit a major life activity and affect the child's diet, for example: <ul style="list-style-type: none">• metabolic diseases, such as diabetes or phenylketonuria (PKU)• food anaphylaxis (life-threatening food allergy) | Yes | Medical statement signed by recognized medical authority ^{2,3} | <ul style="list-style-type: none">• Information about how the child's physical or mental impairment restricts the child's diet• An explanation of what must be done to accommodate the child• The food or foods to be omitted and recommended alternatives, if appropriate |

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<https://portal.ct.gov/-/media/SDE/Nutrition/CACFP/SpecDiet/AssessmentSpDietCACFP.pdf>

CSDE Webpage

Special Diets in CACFP Child Care Programs

Special Diets in CACFP Child Care Programs

[Overview](#)
[What's Next](#)
[Documents/Forms](#)
[Related Resources](#)
[Laws/Regulations](#)
[Contact](#)

Provided by:
Department of Education

Overview

[CACFP](#) | [Program Guidance](#) | [Forms for Centers](#) | [Forms for Homes](#)
[Operational Memos](#) | [Resources](#)

The Connecticut State Department of Education's (CSDE) guide, [Accommodating Special Diets in CACFP Child Care Programs](#), provides guidance on meal modifications for children and infants with special dietary needs, based on the federal nondiscrimination laws and U.S. Department of Agriculture (USDA) regulations. This guide applies to CACFP child care centers (including at-risk afterschool care centers and emergency shelters) and family day care homes.

Children with a Disability

The USDA **requires** reasonable meal modifications on a case-by-case basis for children whose disability restricts their diet, based on a medical statement signed by a recognized medical authority. "Case-by-case basis" means that the meal modifications are specific to the individual medical condition and dietary needs of each child. The Connecticut State Department of Public Health defines a recognized medical authority as a state-licensed health care professional who is authorized to write medical prescriptions under state law. This includes licensed physicians (doctors of medicine or osteopathy), physician assistants, and advanced practice registered nurses (APRN).

Children without a Disability

The USDA **allows**, but does not require, meal modifications for children whose special dietary needs do not constitute a disability. Examples of optional modifications include requests related to religious or moral convictions, general health concerns, and personal food preferences, such as parents who prefer that their children eat a gluten-free diet or organic foods because they believe it is healthier. CACFP facilities may choose to make these accommodations on a case-by-case basis. Meal modifications for children without disabilities must comply with the [CACFP meal patterns for children](#). Meal modifications for infants without disabilities must comply with the [CACFP infant meal patterns](#).

<https://portal.ct.gov/SDE/Nutrition/Special-Diets-in-CACFP-Child-Care-Programs>

Connecticut General Statute 10-212c: Life-threatening food allergies and glycogen storage disease: Guidelines; district plans

- **Applies only to CACFP child care centers in public schools**
- **CSDE developed guidelines**
- **Board of education must implement a plan for the management of students with life-threatening food allergies and glycogen storage disease, based on CSDE guidelines**

https://www.cga.ct.gov/current/pub/chap_169.htm#sec_10-212

CSDE Resource

Guidelines for Managing Life-threatening Food Allergies in Connecticut Schools

- Includes roles and responsibilities for school nurse and school food service staff



<https://portal.ct.gov/SDE/Publications/Managing-Life-Threatening-Food-Allergies-in-Connecticut-Schools>

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- (1) mail: U.S. Department of Agriculture
Office of the Assistant Secretary for Civil Rights
1400 Independence Avenue, SW
Washington, D.C. 20250-9410;
- (2) fax: (202) 690-7442; or
- (3) email: program.intake@usda.gov.

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Inquiries regarding the Connecticut State Department of Education's nondiscrimination policies should be directed to: Levy Gillespie, Equal Employment Opportunity Director/Americans with Disabilities Coordinator (ADA), Connecticut State Department of Education, 450 Columbus Boulevard, Suite 505, Hartford, CT 06103, 860-807-2071, levy.gillespie@ct.gov.